



## UNITED STATES PATENT AND TRADEMARK OFFICE

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APPLICATION NUMBER	FILING OR 371 (c) DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NUMBER
10/759,532	01/20/2004	Judy Wheeler	ACCU-002/01US

CONFIRMATION NO. 7096

## FORMALITIES LETTER



\*OC000000012417528\*

22903  
 COOLEY GODWARD LLP  
 ATTN: PATENT GROUP  
 11951 FREEDOM DRIVE, SUITE 1700  
 ONE FREEDOM SQUARE- RESTON TOWN CENTER  
 RESTON, VA 20190-5061

Date Mailed: 04/22/2004

## NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION

FILED UNDER 37 CFR 1.53(b)

*Filing Date Granted*Items Required To Avoid Abandonment:

An application number and filing date have been accorded to this application. The item(s) indicated below, however, are missing. Applicant is given **TWO MONTHS** from the date of this Notice within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

- The statutory basic filing fee is missing.  
*Applicant must submit \$ 770 to complete the basic filing fee for a non-small entity. If appropriate, applicant may make a written assertion of entitlement to small entity status and pay the small entity filing fee (37 CFR 1.27).*
- To avoid abandonment, a late filing fee or oath or declaration surcharge as set forth in 37 CFR 1.16(e) of \$130 for a non-small entity, must be submitted with the missing items identified in this letter.

The applicant needs to satisfy supplemental fees problems indicated below.

The required item(s) identified below must be timely submitted to avoid abandonment:

- Additional claim fees of \$406 as a non-small entity, including any required multiple dependent claim fee, are required. Applicant must submit the additional claim fees or cancel the additional claims for which fees are due.

SUMMARY OF FEES DUE:

Total additional fee(s) required for this application is \$1306 for a Large Entity

- \$770 Statutory basic filing fee.
- \$130 Late oath or declaration Surcharge.

09/22/2004 FMETEK11 00000026 10759532

01 FC:1001	770.00 OP
02 FC:1051	130.00 OP
03 FC:1202	180.00 OP
04 FC:1201	172.00 OP

- Total additional claim fee(s) for this application is \$406

- \$172 for 2 independent claims over 3.
- \$234 for 13 total claims over 20.

Replies should be mailed to: Mail Stop Missing Parts  
Commissioner for Patents  
P.O. Box 1450  
Alexandria VA 22313-1450

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*A copy of this notice **MUST** be returned with the reply.*

A handwritten signature in dark ink, appearing to read "Shueen", is written over a horizontal line.

Customer Service Center

Initial Patent Examination Division (703) 308-1202

PART 2 - COPY TO BE RETURNED WITH RESPONSE



Attorney Docket No. ACCU-002/01US

PATENT

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of Judy WHEELER

Serial No.: 10/759,532

Examiner: Unassigned

Confirmation No.: 7096

Art Unit: 2122

Filed: January 20, 2004

For: **SYSTEM AND METHOD FOR DISPLAYING THE CENSUS OF A  
HEALTHCARE FACILITY**

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U.S. Patent and Trademark Office  
220 20<sup>th</sup> Street South  
Customer Window, **Mail Stop Missing Parts**  
Crystal Plaza Two, Lobby, Room 1B03  
Arlington, VA 22202

**RESPONSE TO NOTICE TO FILE MISSING PARTS OF  
NONPROVISIONAL APPLICATION**

In response to the Notice to File Missing Parts of Non-Provisional Application filed under 37 C.F.R. § 1.53(b) mailed April 22, 2004, enclosed are:

- ☒ copy of the Notice to File Missing Parts of Application
- ☒ Preliminary Amendment
- ☐ Revocation And New Power By Assignee And Statement Under 37 C.F.R. §3.73(b)
- ☐ Information Disclosure Statement, PTO/SB/08 and 68 references
- ☐ Supplemental Information Disclosure Statement and PTO/SB/08 citing references previously disclosed in application to which this application claims priority
- ☒ Postcard
- ☐ Formal drawing transmittal with attached formal drawings
- ☒ Three-month extension of time
- ☐ A copy of the Official Filing Receipt marked in red to show corrections that are needed. Please make the following corrections in the Official Filing Receipt:

Issuance of a corrected filing receipt is respectfully requested.

and the payment of the following fee(s):

- ☒ Filing fee of \$770.00
- ☒ Surcharge fee for Late Filing of Fee of \$130.00

- ☒ Claim Fees of \$352.00 (calculated below)  
☒ Other fees: Three-month Extension Fee of \$950.00

FOR:	Claims after - Amend.	Claims Prev. = Paid	Extra Claims <sup>1</sup>	Small Entity Rate	Fee	Other Than a Small Entity Rate	Fee	Total Claim Fee
Total Claims	30	20	10	\$9		<b>\$18</b>		\$180.00
Independent Claims	5	3	2	\$43		<b>\$86</b>		\$172.00
Multiple Dependent Claims Not Previously Presented				\$140		\$280		\$0.00
TOTAL								\$352.00

Total Fee due: \$2,202.00.

- ☒ Check in the amount of \$2,202.00 for the total fee is attached.  
☐ Please charge \$\_\_\_ to Deposit Account No. 50-1283 for the total fee. This paper is being submitted in duplicate.


The Commissioner is hereby authorized to charge any appropriate fees under 37 C.F.R. §§1.16, 1.17, and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 50-1283.

Dated: Septemer 21, 2004

Cooley Godward LLP  
ATTN: Patent Group  
One Freedom Square  
Reston Town Center  
11951 Freedom Drive  
Reston, VA 20190-5656  
Tel: (703) 456-8000  
Fax: (703) 456-8100

Respectfully submitted,  
**COOLEY GODWARD LLP**

By:

  
\_\_\_\_\_  
Erik B. Milch  
Reg. No. 42,887



Attorney Document No. ACCU-002/01US

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of Judy WHEELER

Serial No.: 10/759,532

Examiner: Unassigned

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220 20<sup>th</sup> Street S.  
Customer Window  
Crystal Plaza Two, Lobby, Room 1B03  
Arlington, VA 22202

**TRANSMITTAL OF DOCUMENTS**

Enclosed are the following for the above-identified application:

- ☒ Response to Notice to File Missing Parts of Nonprovisional Application
- ☒ Copy of Notice to File Missing Parts of Nonprovisional Application
- ☒ Information Disclosure Statement Transmittal
- ☒ Information Disclosure Statement
- ☒ PTO/SB/08
- ☒ Preliminary Amendment
- ☐ Petition for Extension of Time
- ☒ Return receipt postcard
- ☒ Check in the amount of **\$2,202.00**
- ☐ Please charge \$ to Deposit Account No. 50-1283 for the total fee. This paper is being submitted in duplicate.

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